

Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

May 31, 2016

Boston Scientific Corporation c/o Ms. Renuka S. Krishnan 3574 Ruffin Road San Diego, CA 92123

Re: K052038

Trade/Device Name: Peripheral Cutting Balloon Small Monorail Over-The-Wire

Regulation Number: 21 CFR 870.1250 Regulation Name: Percutaneous Catheter

Regulatory Class: Class II (two)

Product Code: PNO Dated: July 27, 2005 Received: July 28, 2005

Dear Ms. Krishnan:

This letter corrects our substantially equivalent letter of August 16, 2005.

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21)

CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

# Misti L. Malone -S

for Bram D. Zuckerman, M.D.

Director

Division of Cardiovascular Devices

Office of Device Evaluation

Center for Devices and Radiological Health

**Enclosure** 

## INDICATIONS FOR USE

510(k) Number (if known): <u>K05 20 38</u>

Device Name: Peripheral Cutting Balloon<sup>TM</sup>: small Monorail and

Over-the-Wire Delivery systems

Indications For Use:

The Peripheral Cutting Balloon<sup>TM</sup> catheters are indicated for Percutaneous Transluminal Angioplasty of obstructive lesions of synthetic or native arteriovenous dialysis fistulae.

Prescription Use: <u>Yes</u> (Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use: No (21 CFR 807 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Division Sign-Off)

Division of Cardiovascular Devices

510(k) Number

Page 1 of \_\_\_\_

## 510(k) SUMMARY

Submitter's Name and Address

Boston Scientific Corporation

3574 Ruffin Road San Diego, CA 92123

Contact Person

Renuka Krishnan

Principal Specialist, Regulatory Affairs

(858)503-1815

Common or Usual Name

PTA catheter

**Product Code** 

LIT

Classification

Class II

**Proprietary Names** 

Peripheral Cutting Balloon: small Monorail

and Over-the-Wire Delivery Systems

(PCB: small MR and OTW).

### **Predicate Devices**

Boston Scientific small Peripheral Cutting Balloon; K051254

Boston Scientific 1 cm Peripheral Cutting Balloon; K051254 and K040155 Boston Scientific 2 cm Peripheral Cutting Balloon; K051254 and K041993

### **Device Description**

The PCB: small MR and OTW features a balloon with 3 or 4 atherotomes (microsurgical blades) mounted longitudinally on its outer surface. When the PCB device is inflated, the atherotomes score the plaque, creating initiation sites for crack propagation. Percutaneous Angioplasty (PTA) with the PCB device allows dilatation of the target lesion with less pressure, minimizing barotrauma.

Radiopaque markers are placed on the guidewire tubing at the ends of the atherotomes to provide visual reference points for balloon positioning within the vessel. The Rated Burst Pressure (RBP) is 12 atm. The devices are available in nominal balloon diameters from 2.0 mm to 4.0 mm and 1.5 cm length (Table 1, p. 2).

page 1 of 2

Over-the-Wire Nom. Diameter (mm) Monorail PCBO2015140F PCBM2015140F 2.00 PCBO2515140F PCBM2515140F 2.50 PCBM3015140F PCBO3015140F 3.00 PCBO3515140F PCBM3515140F 3.50 PCBM4015140F PCBO4015140F 4.00

Table 1. Model Numbers, PCB:small MR and OTW

The OTW devices are attached to a Y-connector at one end; the MR is attached to a female luer. The catheter body for the PCB: small OTW has two lumens. The outer lumen is the balloon inflation lumen. The inner lumen is used to pass the catheter over a guidewire.

The proximal shaft for the PCB:small MR is a hypotube. This hypotube contains the balloon inflation lumen. The distal shaft is made of Pebax material and has a lumen for balloon inflation as well as a guidewire lumen. The guidewire lumen is colored green for ease of guidewire insertion. The guidewire exit port is 24 cm from the catheter tip. This port facilitates rapid exchange of the catheter. The PCB:small MR and OTW are coated with Bioslide BL at the distal section.

### Intended Use

The Peripheral Cutting Balloons are indicated for Percutaneous Transluminal Angioplasty of obstructive lesions of synthetic or native arteriovenous dialysis fistulae.

### Substantial Equivalence

The PCB: small MR and OTW will incorporate a substantially equivalent design, fundamental technology and intended use as those featured in predicate devices.

### **Performance Testing**

Bench testing and biocompatibility testing support a determination of substantial equivalence. The results of these tests provide reasonable assurance that the proposed devices have been designed and tested to assure conformance to the requirements for its intended use.

#### Conclusion

The PCB: small MR and OTW have been shown to be Substantially Equivalent to the predicate devices.

page dofd

<sup>\*</sup> Catheter length: 140 cm.